

STATEMENT OF DESIGNATION OF COUNSEL

Please use one form for each respondent

MUR 5409NAME OF COUNSEL: Cleta MitchellFIRM: Foley & LardnerADDRESS: Suite 5003000 K Street, N.W.Washington, DC 20007TELEPHONE: (202) 295-4081FAX: (202) 672-5399

The above-named individual is hereby designated as my counsel
and is authorized to receive any notifications and other communications
from the Commission and to act on my behalf before the Commission.

Grover Norquist

Print Name

May 14, 2004
Date


Signature

President
Title
RESPONDENT'S NAME: Grover NorquistADDRESS: 1920 L Street, N.W., Suite 200Washington, DC 20036TELEPHONE: HOME () BUSINESS (202) 785-9266

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